



AF/3624 IFW

Please type a plus sign (+) inside this box →

PTO/SB/21 (12-97)
Approved for use through 9/30/00. OMB 0651-0021

Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

TRANSMITTAL FORM		Application Number	09/488,107
<i>(to be used for all correspondence after initial filing)</i>		Filing Date	January 20, 2000
		First Named Inventor	Warren E. Friss
		Group Art Unit	3624
		Examiner Name	Jagdish Patel
Total Number of Pages in This Submission	94	Attorney Docket Number	23616.001

ENCLOSURES (check all that apply)									
<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment / Response <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition Routing Slip (PTO/SB/69) and Accompanying Petition <input type="checkbox"/> To Convert a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Small Entity Statement <input type="checkbox"/> Request for Refund	<input type="checkbox"/> After Allowance Communication to Group <input checked="" type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Additional Enclosure(s) (please identify below):	<input type="checkbox"/> Supplemental Brief on Appeal (3 copies); Request for Reinstatement of Appeal; check for \$950.00 and return post card						
Remarks									
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT <table border="1"> <tr> <td>Firm or Individual name</td> <td>Cowan, Liebowitz & Latman, P.C.</td> </tr> <tr> <td>Signature</td> <td></td> </tr> <tr> <td>Date</td> <td>August 26, 2004</td> </tr> </table>				Firm or Individual name	Cowan, Liebowitz & Latman, P.C.	Signature		Date	August 26, 2004
Firm or Individual name	Cowan, Liebowitz & Latman, P.C.								
Signature									
Date	August 26, 2004								

CERTIFICATE OF MAILING			
I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Assistant Commissioner for Patents, Washington, D.C. 20231 on this date: <input type="text"/> August 26, 2004			
Typed or printed name	R. Lewis Gable		
Signature		Date	August 26, 2004

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.